STATE OF MAINE



COMMISSION ON GOVERNMENTAL ETHICS AND ELECTION PRACTICES

Mail: 135 State House Station, Augusta, Maine 04333-0135 Office: 242 State Street, Augusta, Maine

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STATEMENT OF SOURCES OF INCOME 1 M.R.S.A. §§ 1016-A et seq.

COVERING THE CALENDAR YEAR JANUARY 1, 2006 THROUGH DECEMBER 31, 2006

| FULL NAME: Stephen Beaudette | Please check the appropriate box and fill in the District number. |
|----------------------------------|---|
| MAILING ADDRESS: 11 Westfield St | |
| CITY: Bidde ford | Member of the Senate, District |
| ZIP CODE: CYTOCS | |
| PHONE NUMBER: <u> </u> | Member of the House, District 134 |

GENERAL INSTRUCTIONS

1. Please file this statement with the Clerk of the House or the Secretary of the Senate by:

5:00 p.m. on February 15, 2007.

- 2. The report covers you, your spouse, and your dependent children.
- 3. Report only specific sources of income. Dollar amounts need not be listed.
- 4. Campaign contributions duly recorded as required by law need not be reported in this statement.
- 5. Attach additional sheets if needed. Label attachments with your name, address, and the date.
- Picase sign on Page 4.
- 7. The completed statements will be posted as a 'pdf' on the Commission's website.
- 8. State law (1 M.R.S.A. § 1018) requires Legislators to file an updated statement with the Commission within 30 days of any change to the information relating to the preceding year. Additionally, the law (1 M.R.S.A. § 1016-B (2)) requires Legislators to make a supplementary statement to the Commission of any reportable liability within 30 days after it is incurred.

| PLEASE REEP A COPY OF T | HUS STATEMENT FOR YOUR FILES. |
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Disclosure statements are made available to members of the public upon request.

Thank you for your cooperation,

PART I. INCOME DERIVED FROM EMPLOYMENT BY ANOTHER. Name each employer from whom you received compensation of \$1,000 or more. Specify also the principal type of economic activity of each employer.

| Name of Employer | Address | Principal Type of Economic Activity of Employer |
|--|---|---|
| Sparhawk Resor | + Ogunquit ME | hospitality |
| | | |
| | | |
| ciner the name and address | a partnership, firm, professional association. | egislators who are self-employed.) reas of economic activity from which you deri or similar business entity, list the major areas |
| 37 | Major Areas of Economic Activity (self) | Major Areas of Economic Activity (partnership, association or similar business entity |
| | | |
| | | |
| derived such income. If this | e derived from self-employment that represent and specify the principal type of economic form of disclosure is prohibited by law, rule | activity of the entity or person from whom yo |
| Name each source of income \$1,000, whichever is greater derived such income. If this | e derived from self-employment that represent and specify the principal type of economic | activity of the entity or person from whom yo |
| Name each source of income \$1,000, whichever is greater derived such income. If this specify only the principal type | e derived from self-employment that represe , and specify the principal type of economic form of disclosure is prohibited by law, rule be of economic activity of the entity or perso | activity of the entity or person from whom you, or an established code of professional ethics in from whom the income was derived. Principal Type of Economic Activity of Entity or Person Who Is the |
| Name each source of income \$1,000, whichever is greater derived such income. If this specify only the principal type | e derived from self-employment that represe , and specify the principal type of economic form of disclosure is prohibited by law, rule be of economic activity of the entity or perso | activity of the entity or person from whom you, or an established code of professional ethics in from whom the income was derived. Principal Type of Economic Activity of Entity or Person Who Is the |
| Name each source of income \$1,000, whichever is greater derived such income. If this specify only the principal type Name of Source | e derived from self-employment that represent, and specify the principal type of economic form of disclosure is prohibited by law, rule of economic activity of the entity or personal Address | activity of the entity or person from whom you, or an established code of professional ethics in from whom the income was derived. Principal Type of Economic Activity of Entity or Person Who Is the |
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| Name each source of income \$1,000, whichever is greater derived such income. If this specify only the principal type Name of Source The Major Areas of ice. If associated with a law fill Name and Address of Firm | e derived from self-employment that represent and specify the principal type of economic form of disclosure is prohibited by law, rule of economic activity of the entity or person Address Address PRACTICE. (For Legislators who are attempt of the major areas of practice of your find Major Areas of Practice (self) | activity of the entity or person from whom you, or an established code of professional ethics in from whom the income was derived. Principal Type of Economic Activity of Entity or Person Who Is the Source of Income |
| Name each source of income \$1,000, whichever is greater derived such income. If this specify only the principal type Name of Source The Major areas of income. The Major areas of income. If associated with a law fill the Name and Address of Firm | e derived from self-employment that represent, and specify the principal type of economic form of disclosure is prohibited by law, rule of economic activity of the entity or personal Address Address PRACTICE. (For Legislators who are attempt, list the major areas of practice of your file.) | activity of the entity or person from whom you, or an established code of professional ethics in from whom the income was derived. Principal Type of Economic Activity of Entity or Person Who Is the Source of Income Source of Income Orneys-at-law only.) List your major areas of irm. Major Areas of Practice (firm) |

PART IV. OTHER SOURCES OF INCOME. Name each source of income of \$1,000 or more not listed in Parts I, II, or III of this form. Do not include gifts. If none, so state.

| Name of Source | Address | Kind of Income |
|---|--|--|
| 1. <u>none</u> | | · |
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| PART V. DISCLOSURE OF \$3,000 or more that you received not list loans from a relative. If no | Quring the reporting period, and list the maid | names of creditors for any unsecured loans of areas of economic activity of each creditor. Do |
| Name of Creditor | Address of Creditor | Principal Type of Economic Activity of Creditor |
| l. none | , | |
| 2 | | |
| | | |
| 3. | | |
| • | | |
| PART VI. DISCLOSURE OF ggregate value of more than \$300 | GIFTS. Name the specific source of each from a single source. If none, so state. | gift of more than \$300. Include gifts with an |
| PART VI. DISCLOSURE OF eggregate value of more than \$300 | GIFTS. Name the specific source of each from a single source. If none, so state. 3. | gift of more than \$300. Include gifts with an |
| PART VI. DISCLOSURE OF ggregate value of more than \$300 ACT C. PART VII. DISCLOSURE OF elated to your official duties. If no | GIFTS. Name the specific source of each from a single source. If none, so state. 3. 4. HONORARIA. List the source of any hone, so state. | gift of more than \$300. Include gifts with an one of the state of the |
| PART VI. DISCLOSURE OF aggregate value of more than \$300 NONE- PART VII. DISCLOSURE OF alated to your official duties. If no | GIFTS. Name the specific source of each from a single source. If none, so state. 3. 4. HONORARIA. List the source of any hone, so state. 3. | gift of more than \$300. Include gifts with an one of the state of the |
| PART VI. DISCLOSURE OF aggregate value of more than \$300 NONE- PART VII. DISCLOSURE OF alated to your official duties. If no | GIFTS. Name the specific source of each from a single source. If none, so state. 3. 4. HONORARIA. List the source of any hone, so state. 3. | gift of more than \$300. Include gifts with an one of the state of the |
| PART VI. DISCLOSURE OF ggregate value of more than \$300 NONE ART VII. DISCLOSURE OF elated to your official duties. If no | GIFTS. Name the specific source of each from a single source. If none, so state. 3. 4. HONORARIA. List the source of any lane, so state. 3. 4. | gift of more than \$300. Include gifts with an onoraria accepted for appearances or speeches |
| PART VI. DISCLOSURE OF aggregate value of more than \$300 NONE. PART VII. DISCLOSURE OF alated to your official duties. If no aggregate the property of the p | GIFTS. Name the specific source of each from a single source. If none, so state. 3. 4. HONORARIA. List the source of any hone, so state. 3. 4. ON BEFORE STATE AGENCIES. Ident for compensation of any amount. If none, so | gift of more than \$300. Include gifts with an onoraria accepted for appearances or speeches |

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| PART X. INCOME RECEIVED BY MEMBERS | |
| | |
| child(ren) during the reporting period and the kind of income received by spouse and (D) beside sources of | ource of income of \$1,000 or more received by your spouse or dependent income represented. Do not include gifts. Indicate (S) beside sources of income received by dependent(s). |
| Type of Economic Activity | |
| Representing Each Source of Income Received | Kind of Income |
| 1. transportation - S | |
| المال مقام المالية الم | #AKKER Employment |
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| 4 | |
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| The intentional filing of a false statement shal | ll be a Class E crime. If the Commission concludes that it false statement, it shall refer its findings of fact to the |
| Attorney General. If the Commission determ tatement or has willfully filed a false statementerest on every question and shall be precluderanch of the Legislature, and shall not attempt | ines that a Legislator has willfully failed to file a required int, the Legislator shall be presumed to have a conflict of ded from voting on any question in committee or in either pt to influence the outcome of any question. A Legislator is subject to a civil parally parally and the legislator. |